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APPLICANTS

Steve J. Lofland, Portland, OR;
 Mark A. Trautman, Aloha, OR;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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| Foreign Priority claimed | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|--------------------------------|---|--|------------------|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | OR | 7 | 31 | 6 |

ADDRESS

INTEL CORPORATION
 c/o INTELLEVATE, LLC
 P.O. BOX 52050
 MINNEAPOLIS, MN 55402
 UNITED STATES

TITLE

Cold plate

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